PTO/SB/01 (07-06)
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to a collection of information unless it contains a valid OMB control number. Under the Paperwork Reduction Act of 1995, no persons are required to respond Attorney Docket ASI/1400(US) **DECLARATION FOR UTILITY OR** Number First Named Inventor Hubbard DESIGN PATENT APPLICATION COMPLETE IF KNOWN (37 CFR 1.63) Application Number 10/549,649 Filing Date Declaration Declaration Submitted after Initial OR Submitted Art Unit Filing (surcharge With Initial (37 CFR 1.16 (e)) Filing **Examiner Name** required) I hereby declare that: Each inventor's residence, mailing address, and citizenship are as stated below next to their name. I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled: System for Measuring and Indicating Changes in the Resistance of a Living Body (Title of the Invention) the specification of which is attached hereto OR 03/19/2004 was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number US2004/006084 and was amended on (MM/DD/YYYY) (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed. **Prior Foreign Application** Foreign Filing Date Priority **Certified Copy Attached?** Country Number(s) (MM/DD/YYYY) Not Claimed YES Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. [Page 1 of 2]

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This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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DECLARATION Supplemental Sheet For Legal Representatives (35 U.S.C. 117) On Behalf of A Deceased or Incapacitated Inventor

- (Enter Deceased or Incapacitated Inventor's Name <u>Lafayette Ron Hubbard</u> Page 4 of 4 Name of Legal Representative: A petition has been filed for this non-signing legal representative										
	Given Name (first and middle (if any)) Family Name or Surname Starkey										
K	Legal Representative's Signature	Z- 4				3 Jan 2007 Date					
	Residence: City Los Angeles	State	CA Country USA			Citlzenship US					
	Mailing Address 7051 Hollywood Blvd.										
	Mailing Address Suite 400										
	City Los Angeles		State CA		Zip 90028	Country	IISA				
	Name of Additional Legal Representative, if any		A petition has been filed for this non-signing legal representative								
- [Given Name (first and middle (if any))		Family Name or Sumame								
	Legal Representative's Signature										
	Residence: City		State		Country		Citizenship				
	Mailing Address										
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	Name of Additional Legal Representative, if any:										
	Given Name (first and middle (if any))			Family Name or Surname							
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	Legal Representative's Signature		Date								
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